

## State of Washington Department of Ecology

## **Application for Permit to Use Artificially Stored Ground Water**

(gray boxes for Ecology use only) INVESTMENTS GONZALEZ 509-398-1535 (Zip Code) Address (Street) (State) 8848 8282 Date and Place of incorporation (if applicant is a corporation) Point of Withdrawal Source (well, tunnel, infiltration trench, etc.) WELL IT OF ECOLOGY Times during year water will be required Maximum gallons per minute Maximum acre-feet per year. 1,520 GIONAL OFFICE MARCH - OCTOBER Approximate location of withdrawal ON SOUTH WEST Located within (smallest legal subdivision) Section Township N. Range (E. or W.) W.M. County GRANT Do you own the land on which this source is located? If not, insert name and address of owner. VESPlace of Use **Recorded Platted Property** Lot Block Of (Give name of plat or addition) If domestic, number of homes or units and type (residential, recreation, etc.) If irrigation, number of acres 52 ACRES Legal Description of Property (on which water is to be used) Copy legal description from deed or attach copy of deed. Tax statement descriptions are not acceptable. Also outline this property on the maps or plats submitted with this application.

(Continue on Reverse Side)

ATTACHED

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		Applicant's Signature		
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		Legal Landowner's Signature	7	
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		8282 KD K	NW QUINCY	WA.
		Legal Landowner's Address		
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This is to certify to	hat I have examined the	foregoing application together with	h the accompanying	maps
ata, and return the	same for correction or co	ompletion as follows:		
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In order to retain	its priority, this application	on must be returned to the Departi	ment of Ecology with	
tions, on or before	·		, 20	
Witnessed my ha	and this	day of	, 20	
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Department of Ecology